NOTICE Your Information may be subject to the Open Records Request.		
Agenda Item # Please indicate your position on this item: FOR the request AGAINST the request NEUTRAL / UNDECIDED None of Above: Citizens Communication	Name (Please PRINT) Address (Optional)	7
Do you wish to speak on this item? YES NO If No, Do you wish to donate your time? YES NO If Yes, To whom?	Phone (Optional) Date All	